



County of Orange

MEMO

Date: _____

To: Supervisor Dept: Auditor-Controller/Accounts Receivable

Prepared By: _____ Phone #: _____

Approved By: _____ Dept/Dist: _____

Subject: Deposit Order Correction

Please correct Deposit Order Number _____ dated _____,

	Fund	Agcy	Org	Actv	Rev/Obj	Sub	Job	Rept Catg	B/S Acct	Amount
From										
To										

? Please send a cc copy of the correcting journal voucher to me

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

? Please send a cc copy of the journal voucher to _____.

Thank you.